

Ideas to Improve our Public/Private Partnerships

Overview

The following outlines thoughts about how Iowa's Department of Human Services and Providers can improve our partnership to serve Iowa's children and families. The following came from our assignment at the *2008 Summit on Public/Private Partnership: Maximizing Partnership Strengths to Achieve Positive Outcomes for Children*, sponsored by the National Quality Improvement Center on the Privatization of Child Welfare Services (funded by the Children's Bureau).

Based on the experience of the child welfare contracts over the past 18 months or more and conversations with our colleagues a proactive approach to our partnerships would be helpful. The following complements the work of the various committees currently working on improving how we serve children and families.

From Partners; Anne Gruenewald & Margaret Wright

Suggested Overall Leadership & Principles for Partnership

- Overall our biggest challenge is to have a shared vision of what partnership looks like, how we contract, message, communicate, develop shared performance outcomes and accountability, train, and act that models our desired partnership way of work. We must have unity in our goals and actions.
- The only way to true partnership is mutual trust and respect. It's okay to agree and to disagree. Our communication and dialogue take place in an open manner. We recognize each party's accountability to their organization; providers are a business with a board, the state has fiduciary accountability of taxpayers' funds, both have accountability to the rules, laws, and better outcomes for the children and families that come into our care.
- Relationships are important to our work with all stakeholders. This means inclusion and opportunities to build our relationships through combined training and events, and informal convening.
- Find more opportunities for joint solution finding and legislation.
- Look for solutions to help DHS work with partners more effectively across divisions, central offices and field; child welfare, mental health, remedial services, Medicaid, and with Juvenile Court.
- Respect all parties during the transition of contracts and focus on the process and the ultimate goal. Acknowledge and communicate the *J-Curve of Transition*; research has uncovered that the change of contracts often results in a dip of the service before it rebounds. Depending on the size of the change the quality and quantity of service can take months descending from the transition date before it

begins to rebound/ascend to the level that the service was prior to the provider change. However in the J-Curve, eventually the transition exceeds prior service levels. Several states at the summit supported the research; Ohio, New York, Wisconsin.

- While any new principles should be at the highest standards the adoption of them in practice would be evolutionary. However there needs to be rigor, flexibility and vigilance by leadership of all parties to uphold.

Suggested Action Steps

Most of the following suggestions are based on the work that is currently underway. The new partnership model is emerging but it is time to be more deliberate in our communication of principles that the parties will work through.

- Work with the Department and Providers to develop a shared vision, message and actions that demonstrate our ideal partnership. This is one that the leadership must initiate, implement and model.
- Prepare suggestions/report for the various committees and organizations that address partnership; CWAC, Cabinet, Coalition, CW Service Array, Contractors convening, etc.
- Consider using tools like the breakthrough series that has small tests of change occur before we entirely rewrite contracts, (eg. Group Care). Let's learn from the challenges all stakeholders on the IKN, FSRP and Safety contracts, etc experienced.
- Pilot: IKN event to celebrate the partnership this fall...time to redefine and refine our partnership relationship for the future. This would apply to the DHS Field and Central office, along with IKN Lead Agency and partner organizations, including leadership and staff.
- The training contract and implementation for the providers and the joint training implementation
 - Use this first year to create our shared vision; training and TA from Charlotte McCullough and Ellen Kagen type approaches
 - We need to define roles, technical versus adaptive approaches
- What deliberate work can we do on policy and practice for the upcoming legislative session to model partnership; shelter/emergency services, etc.
- We could learn from how other states have integrated services to better serve families. Example the *Wrap Around Milwaukee* initiative that pools more funds. Their human services department does more wrap around with detention, mental health, remedial services, and CINA type cases to better serve the family's needs

with greater flexibility and effectiveness. Increase family unity and children's time with youth.

- Make sure that all stakeholders coming into service of children understand and act by the principles. Need to see that the any newly developed Iowa public/private partnership principles are within and support the DHS Model of Practice. Are there other such principles in existence? All stakeholders includes
 - DHS across all divisions central office and field, includes committees, data and finance areas
 - Provider's leadership, supervisors and staff, including Board members
 - Key state departments; Education, Juvenile Justice, Health, etc.
 - Schools of social work and other related providers to the workforce
 - Children and families that would also help us shape our principles